

## NORTH CAROLINA STATE BOARD OF ELECTIONS AND ETHICS ENFORCEMENT

## 2018 STATEMENT OF ECONOMIC INTEREST CANDIDATE

919-814-3600 www.ncsbe.gov/Ethics/SEI

2018 ELECTION FILER'S NAME (FIRST, MIDDLE, LAST)					
Prefix	First Name	Middle Nam	Name Last Name Suffix		
Ms.	Mary Ann	E.	E. Black		
CURRENT EMPLOYER		JOB TITLE			
Duke Health			Assoc. vice President		
NATURE OR T	YPE OF BUSINESS				
Health Care					
REASON FOR	FILING (SELECT ALL THA	Γ APPLY)			
☑ CANDIDATI	E For (Specify the office for v	which you are runnin	g)		
House of Repres	sentatives				
STATE GOVERNMENT JOB (Specify Agency)  BOARD/COMMISSION (List complete name of all boards on which you are serving or are being consider			•		
JUDICIAL OFFICER (Specify Office)			LEGISLATOR (Specify House or Senate)		
			House of Representatives		

A. Do other immediate far	nily m	embers reside in you	r household?				
☐ Yes ☑ No							
When used throughout this			•	• •		-	
members of your extended				n, grandchildr	en, parents, grandpa	rents, a	and siblings, and the
spouses of each of those p	ersons)	who reside in your	household.				
List the full name of <b>all a</b>	dulta o	nd amanainatad mi	mona in vicina i	household A	minor is a shild una	lan 10 <b>-</b>	vacuus ald. Min aus aus
emancipated by marriage,		_	•			iei 16 y	years old. Willions are
FULL NAME OF		ELATIONSHIP		OYER	JOB TITLE		NATURE OF
ADULTS & EMANCIPATED MINORS					002 11122		BUSINESS
B. List <b>ONLY the initial</b> :	s of all	unemancinated mi	nors in your	household bel	ow A minor is a ch	ild und	ler 18 years old
Note: You must list the fo		_	·				· ·
INITIALS FOR UNEMANCIPATED CHILDREN		ELATIONSHIP		OYER	JOB TITLE		NATURE OF BUSINESS
PROPERTY INTEREST	 Γ <b>S</b>						
1. As of December 31, 201		vou vour spouse or	members of	vour immedia	ate family:		
	_	• •			<del></del>	ket val	ue of \$10,000 or more?
✓ Yes □ No				14411.g			οι φτο,οσο στ <b>ι</b> ιιστ <b>ο</b> ι
Owner of Real Estat	te	% Ownership	Interest	Loca	tion by City	]	Location by County
Mary Ann Black		100		Durham		Durham	
B. Lease or rent real es	tate or	personal property to	or from the S	State of North	Carolina with a mar	ket val	ue of \$10,000 or more?
☐ Yes ☑ No		· · · · <u> </u>					
Name of Lessor		Name of Lessee	(Renter)	If Real Estate, Location by City & County		If Per	sonal Property, Describe
						1	

2. At any time during $\underline{2016}$ or $\underline{2017}$ , did yo			e family sell to or buy from the State of	
North Carolina personal property with a ma	rket value of \$10,000 o	r more?		
☐ Yes ☑ No  Name of Purchaser	Nama	£ Collon	Tune of Duenouty	
Name of Furchaser	Name (	of Seller	Type of Property	
FINANCIAL INTERESTS				
3. As of <u>December 31, 2017</u> , did you, your valued at \$10,000 or more? <u>LIST EACH C</u> A. <u>Stock</u> in a publicly owned company?  ☐ Yes ☑ No			own any of the following financial interests	
or pension or deferred compensation	on plans) if: (i) the fund ly member are able to o	l is publicly traded or i	nal funds, regulated investment companies, ts assets are widely diversified; and (ii) in the mutual fund, investment company, or	
Owner of Interest		Full Name of Company (Do not use a ticker symbol)		
B. Stock Options in a company or busine  ☐ Yes ☑ No	ess?			
Owner of Stock Option	on	Full Name of Co	ompany (Do not use a ticker symbol)	
C. Interests in a non-publicly owned conpartnerships, joint ventures, limited liability  ☐ Yes ☑ No If "No", proceed to ques	companies, limited lia	_	sole proprietorships, partnerships, limited closely held corporations)?	
Owner of Interest		Name of	Company or Business Entity	

C (1). For each non-publicly owned company or business entity (the "primary company") identified in question 3.C above,						
please list the names of any other companies or business entities in which the primary company owns securities or equity interests						
valued at over \$10,000, if known.						
Non-Publicly Owned Company or Business Entity (the Primary Company)  Other Companies in which the Primary Company Owns Security or Equity Interests						
☐ None or Not Known						
C (2). If you know that any company or	business entity listed i	n 3.C or 3.C(1) above h	nas any material business dealings or			
business contracts with the State of North Co	arolina, or is regulated	by the State, provide a	brief description of that business activity.			
Name of Company or Busine	ss Entity	Description of	of Business Activity with the State			
☐ None or Not Known						
4. As of <u>December 31, 2017</u> , were you, your spouse, or members of your <u>immediate</u> family the beneficiaries of a vested trust with a value of \$10,000 or more that was created, established, or controlled <u>by you</u> ?  Do not list assets held in blind trusts. See 2017 SEI Helpful Tips for the definition of "Vested Trust" and "Blind Trust."						
✓ Yes □ No						
Name and Address of Trustee	Description	of the Trust	Your Relationship to the Trust			
MaryAnn E. Black 615 Orindo Drive Durham, NC 27713-0000	Vested		Owner of Trust			
5. As of <u>December 31, 2017</u> , did you, your spouse, or members of your <u>immediate</u> family have liabilities of \$10,000 or more, <u>excluding</u> the mortgage on your primary personal residence? Examples include credit card debts, auto loans, student loans, personal loans and intra-family debt.   Yes No						
Name of Debtor (You, Spouse, Immedia	te Family Member)	Type of Credito	or (Commercial Bank, Credit Union, Individual, etc.)			

		n \$5,000 received by you, your spo I government retirement, profession	·
dividends, rental income, busines	ss income, and other types of inc	come required to be reported on you	or State and federal tax returns.
Do <u>not</u> include income received	l from the following sources:		
Capital gains	Federal government re	etirement	
Military retirement	► Social security income	/SSDI	ı
Recipient of Income	Name of Source	Type of Business/Industry	Type of Income
☐ I had no reportable income ov	er \$5,000 in 2017.		
MaryAnn Black	Duke Health	Health Care	salary
MaryAnn Black	State	Government	Salary
PROFESSIONAL AND CIVIC	C RELATIONSHIPS		
employee, independent contractor Carolina primarily for religious,	or, or registered lobbyist of a nor	nmediate family a director, officer, approfit corporation or organization of object the alth and safety, or education	operating in the State of North
* *		y a political subdivision of the State	
► Do not list organization  Name of Person	His/Her Position	Name of Nonprofit Corporation or Organization	Nature of Business or Purpose of Organization
7(b). If the nonprofit corporation	s or organizations listed above of	do business with the State of North	Carolina or receive State funds,
	n of the nature of that business, i poration or Organization	f known or with which due diligend  Describe State Busin	ness or State Funding
☐ None or Not Known			

Please answer the following ques	tion as it p	_	•				
0 D : 2017			presentatives	CC"	. 1 1 1 6		
8. <u>During 2017</u> , were you, your spouse, or members of your <u>immediate</u> family a director, officer, or governing board member of any society, organization, or advocacy group with an interest in matters over which your agency or board may have jurisdiction?							
			, , ,	·	· ·		
<u> </u>		•	• •	_	ou are filing because you are a		
legislator or a	a judicial o	fficer or you are filing	as an appointee to thos	e offices.			
▶ Do not list organization	s of which	, , , , , , , , , , , , , , , , , , ,	·	· •			
Name of Person			, Organization or cy Group	Leadersl	nip Position (Director, Officer, Board Member)		
· ·	y group wi dicial Offic	nembers of your immed th an interest in matters cer - You are not requ	s over which your agen	cy or board	-		
<ul> <li>Do not list organization</li> </ul>	s of which	you are only a member	r (not serving in a leade	rship role).			
Name of Person			, Organization or cy Group	Leadersl	nip Position (Director, Officer, Board Member)		
9(a). List the name of each comp was an employee, director, office	•	· ·	·		· — ·		
Name of Person		tionship to Filer	Name of Comp		Role of Person		
✓ No Business Associations			,				

· · · · · · · · · · · · · · · · · · ·	npany or business entity listed in 9(a a or was regulated by the State as o	•			
-	ny or Business Entity	Description of Busine	ss Activity with the State		
✓ Not applicable (No entities l	listed on #9a)  \[ \begin{align*} \text{No relationship / } \end{align*}	Not known			
10. Are you a practicing attorney?  ☐ Yes ☑ No ☐ Judicial Officer/State Attorney  If "Yes", check each category of legal representation in which you or the law firm with which you are affiliated has earned legal fees					
of more than \$10,000 during 2					
☐ Administrative	☐ Admiralty	☐ Corporate	☐ Criminal		
☐ Decedent's Estates	☐ Environmental	☐ Insurance	Labor		
Local Government	Real Property	Securities	Tax		
☐ Tort litigation (including negligence)	☐ Utilities Regulation	Other category not listed.			
	censed professional (other than an a	• • •	ulting services individually or as a		
Type	of Business	Nature of Se	rvices Rendered		

Please answer the following ques	tion as it pertains to the following	- · · · · · · · · · · · · · · · · · · ·					
12 Ama viou on vious ammlavion vio	House of Rej		amalayan ayanantliy				
<ul> <li>12. Are you or your employer, your spouse or members of your immediate family, or their employer currently:</li> <li>Licensed by the State board or employing entity with which you are or will be associated or</li> </ul>							
• Regulated by the State board of	or employing entity with which yo	u are or will be associat	ed <b>or</b>				
• Have a business relationship w	vith the State board or employing of	entity with which you a	re or will be associated?				
☐ Yes ☑ No ☐ Legislator/Judicial Officer - You are not required to complete this question if you are filing because you are a legislator or a judicial officer ("judicial officer" is defined in the SEI Helpful Tips) or you are filing as an appointee to those offices.							
Name of Person	Name of Employ	er (if applicable)	Type of Relationship (Licensing, Regulatory, Business)				
• <u>Licensed by</u> the State board or	House of Repour spouse or members of your im employing entity with which you or employing entity with which you	mediate family, or their are or will be associate	d <b>or</b>				
Yes ✓ No ☐ Legislator/Ju legislator or a	•	ired to complete this qu	re or will be associated? estion if you are filing because you are a Helpful Tips) or you are filing as an				
Yes ✓ No ☐ Legislator/Ju legislator or a	dicial Officer - You are not requal judicial officer ("judicial officer"	ired to complete this qu " is defined in the SEI I	estion if you are filing because you are a				
Yes ✓ No Legislator/Ju legislator or a appointee to	dicial Officer - You are not requal judicial officer ("judicial officer those offices.	ired to complete this qu " is defined in the SEI I	estion if you are filing because you are a Helpful Tips) or you are filing as an  Type of Relationship (Licensing,				
Yes ✓ No Legislator/Ju legislator or a appointee to	dicial Officer - You are not requal judicial officer ("judicial officer those offices.	ired to complete this qu " is defined in the SEI I	estion if you are filing because you are a Helpful Tips) or you are filing as an  Type of Relationship (Licensing,				
Yes ✓ No Legislator/Ju legislator or a appointee to	dicial Officer - You are not requal judicial officer ("judicial officer those offices.	ired to complete this qu " is defined in the SEI I	estion if you are filing because you are a Helpful Tips) or you are filing as an  Type of Relationship (Licensing,				
Yes ✓ No ☐ Legislator/Ju legislator or a appointee to  Name of Person  13. Are you, your spouse, or a me	dicial Officer - You are not requal judicial officer ("judicial officer those offices.  Name of Employ	ired to complete this qu " is defined in the SEI F rer (if applicable)  urrently registered as a	estion if you are filing because you are a Helpful Tips) or you are filing as an  Type of Relationship (Licensing,				
☐ Yes ☑ No ☐ Legislator/Ju legislator or a appointee to  Name of Person  13. Are you, your spouse, or a maregistered as such within the 12 m	dicial Officer - You are not requal judicial officer ("judicial officer those offices.  Name of Employ  ember of your immediate family compared to the compare	ired to complete this qu " is defined in the SEI F rer (if applicable)  urrently registered as a	estion if you are filing because you are a Helpful Tips) or you are filing as an  Type of Relationship (Licensing, Regulatory, Business)				
Yes ✓ No ☐ Legislator/Ju legislator or a appointee to  Name of Person  13. Are you, your spouse, or a me registered as such within the 12 m ☐ Yes ✓ No	dicial Officer - You are not requal judicial officer ("judicial officer those offices.  Name of Employ  ember of your immediate family companies the preceding your filing of the process.	ired to complete this question is defined in the SEI For (if applicable)  rer (if applicable)  urrently registered as a is form?	estion if you are filing because you are a Helpful Tips) or you are filing as an  Type of Relationship (Licensing, Regulatory, Business)				
Yes ✓ No ☐ Legislator/Ju legislator or a appointee to  Name of Person  13. Are you, your spouse, or a me registered as such within the 12 m ☐ Yes ✓ No	dicial Officer - You are not requal judicial officer ("judicial officer those offices.  Name of Employ  ember of your immediate family companies the preceding your filing of the process.	ired to complete this question is defined in the SEI For (if applicable)  rer (if applicable)  urrently registered as a is form?	estion if you are filing because you are a Helpful Tips) or you are filing as an  Type of Relationship (Licensing, Regulatory, Business)				
Yes ✓ No ☐ Legislator/Ju legislator or a appointee to  Name of Person  13. Are you, your spouse, or a me registered as such within the 12 m ☐ Yes ✓ No	dicial Officer - You are not requal judicial officer ("judicial officer those offices.  Name of Employ  ember of your immediate family companies the preceding your filing of the process.	ired to complete this question is defined in the SEI For (if applicable)  rer (if applicable)  urrently registered as a is form?	estion if you are filing because you are a Helpful Tips) or you are filing as an  Type of Relationship (Licensing, Regulatory, Business)				

14. During any calendar quarter i candidate), did you	n 2017 (but only the time period a	fter you were appointed, employe	d or filed or were nominated as a		
• receive any gift(s) exceeding \$2	200 per quarter from a person or g	roup of persons acting together, a	<u>nd</u>		
• when both you and those person	n(s) were outside North Carolina a	at the time you accepted the gift(s)	) <u>, and</u>		
• the gift(s) were given under circ	cumstances that would lead a reas	onable person to conclude that the	ey were given for lobbying?		
☐ Yes ☑ No					
▶ Do not report gifts given	n by members of your extended fa	mily.			
1 6 6	nave previously been reported by	•	etary of State on the "Expense		
Date Item Received	Name and Address of Donor(s)	Describe Item Received	Estimated Market Value		
Please answer the following ques	tion as it pertains to the following  House of Rep	· ·			
15. <u>During 2017</u> (but only the times)	ne period after you were appointed	l, employed, or filed or were nomi	inated as a candidate) did you		
• accepted a "scholarship" exceed	ding \$200 from a person or group	of persons acting together and			
• those person(s) were outside No	orth Carolina and				
• the scholarship was related to y	our public position? A "scholars	hip" is a grant-in-aid, either dir	ect or indirect, to attend a		
conference, meeting, or similar	event, including tuition, travel,	lodging, meals, and other similar	ar expenses.		
☐ Yes ☑ No ☐ Judicial Officer - You are not required to complete this question if you are a judicial officer or you are filing as a judicial officer appointee.					
<ul> <li>Do not report gifts that I Report for Exempted Pe</li> </ul>	nave previously been reported by resons."	you to the Department of the Secr	etary of State on the "Expense		
•	red to report scholarships paid by s a member or participant or an aff		ation of which the legislator or		
Date of Scholarship	Name and Address of Donor(s)	Describe Event	Estimated Market Value		

Please answer the following ques	-	g board/agency: presentatives	
15. During 2017 (but only the tim		-	nominated as a candidate) did you
• accepted a "scholarship" excee			
• those person(s) were outside No		· · · · · · · · · · · · ·	-
•	our public position? A "scholar	shin" is a grant-in-aid eithe	r direct or indirect to attend a
conference, meeting, or similar	• •	•	
☐ Yes ☑ No ☐ Judicial Official officia	•	plete this question if you are a	judicial officer or you are filing as a
<ul> <li>Do not report gifts that I Report for Exempted Pe</li> </ul>		you to the Department of the	Secretary of State on the "Expense
•	ired to report scholarships paid by s a member or participant or an af		anization of which the legislator or
Date of Scholarship	Name and Address of Donor(s)	Describe Event	Estimated Market Value
Please answer the following ques	-	g board/agency: presentatives	
16. Were you appointed or are yo		•	ne <b>Governor</b> or another Council of
State member?			
<b>Council of State members are:</b>			
• Governor	• Lt. Governor	• Secretary of Sta	ite
State Auditor	• State Treasurer	• Superintendent	of Public Instruction
Attorney General	• Commissioner of Ag	riculture • Commissioner of	of Labor
• Commissioner of Insurance	e		
☑ Yes □ No			
· · · · · · · · · · · · · · · · · · ·		,	th a cumulative total of more than
\$1,000 to the Governor or other	r Council of State member who	appointed you.	
	ed in N.C.G.S. 163-278.6(6) and if funds, loan, payment, gift, pledge		"any advance, conveyance, deposit, mything of value whatsoever."
Date	Am	ount	Contributed to
☑ No contribution(s) with a cum	ulative total of more than \$1,000		

Please answer the following question as it po	ertains to the following board/age	ncy:	
	House of Representativ	ves	
16. Were you appointed or are you being co	nsidered for an appointment to a c	covered boar	d by the <b>Governor</b> or another Council of
State member?			
Council of State members are:			
• Governor	• Lt. Governor	• Secretary	of State
State Auditor	• State Treasurer	• Superinte	endent of Public Instruction
Attorney General	• Commissioner of Agriculture	• Commiss	sioner of Labor
• Commissioner of Insurance			
✓ Yes □No			
If "Yes", list all contributions you (NOT i	immediate family members) ma	de during 20	017 with a cumulative total of more than
\$1,000 to the Governor or other Council o	of State member who appointed	you.	
Contributions are defined in N C G	GS 163-278 6(6) and include but	are not limit	ted to, "any advance, conveyance, deposit,
			ey or anything of value whatsoever."
Date	Amount		Contributed to
✓ No contribution(s) with a cumulative tota	al of more than \$1,000		

Please answer the following question as it pertains to the following board/agency:  House of Representatives	
17. Are you an appointee or prospective appointee to:	
<ul><li>a. the head of a principal state department (e.g. cabinet secretary) appointed by the Governor;</li><li>or</li><li>b. a North Carolina Supreme Court Justice, Court of Appeals, Superior or District Court Judge;</li></ul>	☐ Yes ☑ No If "No", proceed to question 18.
or c. a member of any of the following boards:	
<ul> <li>ABC Commission</li> <li>Coastal Resources Commission</li> <li>State Board of Education</li> <li>State Board of Elections</li> <li>Division of Employment Security</li> <li>Environmental Management Commission</li> <li>Industrial Commission</li> <li>Human Resources Commission</li> <li>Rules Review Commission</li> <li>Board of Transportation</li> <li>UNC Board of Governors</li> <li>Utilities Commission</li> <li>Wildlife Resources Commission</li> </ul>	
d. If so, were you appointed or are you being considered for appointment to that public position by a Council of State member? Council of State members are listed in question 16.	☐ Yes ☑ No If "No", proceed to question 18.
<ul> <li>e. If so, you must indicate whether during 2017 you (not immediate family members) engaged in any of the following activities with respect to or on behalf of the candidate or campaign committee of the Council of State member who appointed you to your public position:</li> <li>i. Collected contributions from multiple contributors, took possession of such multiple contributions, and transferred or delivered those collected contributions to the candidate or committee? Contributions are defined in question 16.</li> </ul>	□ Yes ☑ No
ii. Hosted a fundraiser at your residence or place of business?	☐ Yes ☑ No
iii. Volunteered for campaign-related activities, which include, but are not limited to, phone banks, event assistance, mailings, canvassing, surveying, or any other activity that advances the campaign of a candidate?	□ Yes ☑ No

Please answer the following question as it pertains to	the following board/agency House of Representatives				
17. Are you an appointee or prospective appointee to:			ı		
<ul> <li>a. the head of a principal state department (e.g. cabinet secretary) appointed by the Governor;</li> <li>or</li> <li>b. a North Carolina Supreme Court Justice, Court of Appeals, Superior or District Court Judge;</li> <li>or</li> <li>c. a member of any of the following boards:</li> </ul>				☐ Yes ☑ No  If "No", proceed to question  18.	
<ul> <li>ABC Commission</li> <li>Coastal Resources Commission</li> <li>State Board of Education</li> <li>State Board of Elections</li> <li>Division of Employment Security</li> <li>Environmental Management Commission</li> <li>Industrial Commission</li> <li>Human Resources Commission</li> <li>Rules Review Commission</li> <li>Board of Transportation</li> <li>UNC Board of Governors</li> <li>Utilities Commission</li> <li>Wildlife Resources Commission</li> </ul>					
d. If so, were you appointed or are you being considered for appointment to that public position by a Council of State member? Council of State members are listed in question 16.			☐ Yes ☑ No If "No", proceed to question 18.		
e. If so, you must indicate whether during 2017 y in any of the following activities with respect to a committee of the Council of State member who a i. Collected contributions from multiple common contributions, and transferred or delivered the or committee? Contributions are defined in a	or on behalf of the candidat appointed you to your publi tributors, took possession on asse collected contributions	e or campaign c position:  f such multiple	□Yes	☑ No	
ii. Hosted a fundraiser at your residence or place of business?  iii. Volunteered for campaign-related activities, which include, but are not limited to, phone banks, event assistance, mailings, canvassing, surveying, or any other activity that				<ul><li>✓ No</li><li>✓ No</li></ul>	
advances the campaign of a candidate?  18. Have you ever been convicted of a felony for whi expungement regarding that conviction?  ☐ Yes ☑ No	ch you have not received ei	ither: (i) a pardon of	innoce	nce; or (ii) an order of	
Offense	Date of Conviction	County of Convic	ction	State of Conviction	

19. Are you aware of any other information that <i>you believe</i> may as compliance with the State Government Ethics Act?	sist the State Ethics Commission in advising you concerning your
☐ Yes ☑ No If yes, please provide such information below.	
AFFIRMATION	
I affirm that the information provided in this Statement of Economi accurate to the best of my knowledge and belief.	c Interest and any attachments hereto are true, complete, and
I also certify that I have not transferred, and will not transfer, any as disclosure while retaining an equitable interest.	sset, interest, or property for the purpose of concealing it from
I understand that my Statement of Economic Interest and any attach	nments or supplements thereto (with the exception of the
Confidential Form regarding Unemancipated Children) are public re	ecord.
I acknowledge that I have read and understand N.C.G.S. 138A-26 rand N.C.G.S. 138A-27 regarding providing false information:	egarding concealing or failing to disclose material information
§ 138A-26. Concealing or failing to disclose material informat	ion.
A filing person who knowingly conceals or knowingly fails to statement of economic interest under this Article shall be guilty action under G.S. 138A-45.	disclose information that is required to be disclosed on a y of a Class 1 misdemeanor and shall be subject to disciplinary
§ 138A-27. Penalty for false information.  A filing person who provides false information on a statement the information is false is guilty of a Class H felony and shall be	of economic interest as required under this Article knowing that be subject to disciplinary action under G.S. 138A-45.
☑ I Agree. It is my intention that this check box constitutes my ele information provided in this Statement of Economic Interest and best of my knowledge and belief.	
Filed Electronically	2/19/2018
Signature	Date
Mary Ann E. Black	
Printed Name	